PROFIT CORPORATION ANNUAL REPORT

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HAME STREET ADDRESS

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

6.3 STREET ADDRESS

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # \$23226

1. Corporation Name PIONEER CANADIAN (USA), INC.

SIGNATURE:

727-391-8994

07-26-1999 90017 001 ***400.00

Jun 24, 1999 8:00 am Secretary of State 06-24-1999 90013 022 ***150.00

PIONEER	CANADIAN (USA), INC.									
Principal Place of	of Business	Mailing Address) 1	I n d in guru d	f ill fra nc bilig	ASANC ASANC IA DI	
14560 GULF BLVO MEDEIRA BEACH FL 33708		14560 GULF BLYD 856 2ND AVE. NORTH								
US		MADEIRA BEACH FL 33708			[DO NOT WRITE IN THIS SPACE				
		US				3. Date Incorporated or Qualifed 01/07/1991				
2. Principal Place of Business		2a. Mailing Address			1	4. FEI Number		A	pplied For	
21		26				98-0117878		N	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		_	5. Certificate of Status Desired			Additional equired		
City & State		City & State			6. Election Campaign Financing — Trust Fund Contribution					
Zip	Country	Zip	Cou	ntry		8. This corporation owes the curre	ent vear int			
4	25	h	30	•		Personal Property Tax.		Yes	I X No	
	9. Name and Address of Current		Ξ			10. Name and Address of New R	egistered .	Apent		
				81 Name						
Cullem, John P. Esquire 856 2nd Avenue North				82 Street	Address	ddress (P.O. Box Number is Not Acceptable)				
ST. PE	TERSBURG FL 33701			83		<u></u>	·			
				84 City				85 Zip	Code	
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office or regi	the provisions of Sections 607.0502 istered agent, or both, in the State of familiar with, and accept the obligation	Florida. Such change was aut	horized	pove-named by the corp	corpora oration's	ation submits this statement for the ps board of directors. I hereby accept	purpose of	changing its	registered egistered	
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed_or or amattachrypant with an addirect with all other like empowered.